

COMBINED DECLARATION AND
POWER OF ATTORNEY

ATTORNEY DOCKET NO. 693

As a below-named inventor, I hereby declare that:

Andreas STOEHRMANN
Marc-Aurel VOTH

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention **METHOD OF EDGE GLUEING, AND TENSIONING AGGREGATE WITH A DEVICE FOR EDGE GLUEING** the specification of which:

(Check one) X is attached hereto.

_____ was filed on _____ as

Application Serial No. _____ and

was amended on _____
(if applicable)

was amended through _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section § 119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Priority Claimed

<u>198 27 647.8</u>	<u>DE</u>	<u>JUNE 22, 1998</u>	<u>X</u>	
Priority Number	Country	Date filed (Priority Date)	Yes	No
<u> </u>	<u> </u>	<u> </u>	<u>Yes</u>	<u>No</u>
Priority Number	Country	Date filed (Priority Date)	Yes	No
<u> </u>	<u> </u>	<u> </u>	<u>Yes</u>	<u>No</u>
Priority Number	Country	Date filed (Priority Date)	Yes	No

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is

Signature:	Date:	Residence and Full Postal Address: Schulweg 8 21514 Witzeze Germany
Full Name of First or Sole Inventor: Andreas STOEHRMANN	Citizenship: DE	
Signature:	Date:	Residence and Full Postal Address: Hamburger Rathausstrasse 31 21073 Hamburg Germany
Full Name of Second Inventor: Marc-Aurel VOTH	Citizenship: DE	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Third Inventor:	Citizenship:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Fourth Inventor:	Citizenship:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Fifth Inventor:	Citizenship:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Sixth Inventor:	Citizenship:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Seventh Inventor:	Citizenship:	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Eighth Inventor:	Citizenship:	